

## SAN DIEGO COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH - CUPA HAZARDOUS MATERIALS DIVISION P.O. BOX 129261, SAN DIEGO, CA 92112-9261

(619) 338-2222 FAX (619) 338-2377 1-800-253-9933

## HAZARDOUS WASTE TANK CLOSURE CERTIFICATION

Page of														_					
I. FACILITY IDENTIFICATION																			
BUSINESS NAM	FACII	LITY ID#	3	7		0	0	0						1					
TANK OWNER	ME		·										7	740					
TANK OWNER	AD	DRESS												7	741				
TANK OWNER	CIT	Υ	742 STATE 743 ZIP CODE 744																
			II. T	TANK CI	LOSUF	RE INFO	)RMA	TIO	N										
	Tank ID # Concentration of Flammab					e Vapor		Concentration of Oxygen											
TANK INTERIOR ATMOSPHERE READINGS		s page for more than three tanks)	Тор	Top Center		Bottom			Тор				Center			Bottom			
	1	745	746a		746b	16b 746		бс	747a		ı	74		17ь	747c				
	2	748	749a		749b	749		Эс	750a			ı	750b				7:	50c	
	3	751	752a		752b		752	2c	753a			1	753b			753c			
				III. (	CERTI	FICAT	ION												
On examination	of th	e tank. I certify the t	tank is visually free fro	om product.	sludge, s	scale (thin.	flaky res	idual	of tanl	k cont	ents).	rins	eate a	nd debris	s. I furth	er certif	v that	t	
			nd accurate to the best			,	•										,		
SIGNATURE O	STATUS OR AFFILIATION OF CERTIFYING PERSON																		
							Certifier is a representative of the CUPA, authorized agency, or LIA:												
NAME OF CERTIFIER (Print) 754							☐ Yes ☐ No												
							Name of CUPA, authorized agency, or LIA:										7	761	
TITLE OF CER																			
		If certifier is other than CUPA / LIA check appropriate box below:																	
ADDRESS	_ □ a. Ce	rtified In	dustri	ial Hyg	gienist	t (CII	H)												
							b. Certified Safety Professional (CSP)												
CITY 757							c. Certified Marine Chemist (CMC)												
	d. Registered Environmental Health Specialist (REHS)																		
PHONE	□ d. Registered Environmental Treatur Specialist (RETIS) □ e. Professional Engineer (PE)																		
THORE			_			antal	1000	accor											
759							☐ f. Class II Registered Environmental Assessor ☐ g. Contractors' State License Board licensed contractor (with hazardous												
DATE CERTIFICATION TIME							ubstance								( , , , , , , , , , , , , , , , , , , ,				
//																			
TANK PREVIO	USL	Y HELD FLAMMA	ABLE OR COMBUST	TIBLE MAT	ERIALS												7	763	
•			be re-checked with a			•					on the	tank	c.)		es 🔲 N	О			
CERTIFIER'S TANK MANAGEMENT INSTRUCTIONS FOR SCRAP DEALER, DISPOSAL FACILITY, ETC:																			
			ank to the recycling / disp moval contractor; and the				CUPA. If	there i	is no Cl	UPA, o	copies	shall	be sub	mitted to	the LIA a	nd autho	rized		

## **Hazardous Waste Tank Closure Certification**

Complete and submit this page prior to initiating any cleaning, cutting, dismantling, or excavation of a tank system that meets the conditions below: - Any tank system that previously held a hazardous material or a hazardous waste, that is identified as a hazardous waste, and that is destined to be

disposed, reclaimed or closed in place. - This does not apply to tank systems regulated under a hazardous waste facility permit, other than permit by rule (PBR), or to tank systems regulated under a grant of interim status, nor to a tank system or any portion thereof, that meets the definition of scrap metal in 22 CCR Section 66260.10 and is

Refer to 22 CCR Section 67383.3 and 23 CCR Section 2672 for disposal requirements for tank systems.

(Note: the numbering of the instructions follows the data element numbers that are on the UPCF pages. These data element numbers are used for electronic submission and are the same as the numbering used in 27 CCR, Appendix C, the Business Section of the Unified Program Data Dictionary.)

Please number all pages of your submittal. This helps your CUPA or local agency identify whether the submittal is complete and if any pages are separated.

- FACILITY ID NUMBER Enter the 6 character Permit # on your Unified Program Facility Permit (UPFP). If you do not have a Unified Program Facility Permit, leave this blank.
- BUSINESS NAME Enter the full legal name of the business. This is the same as the terms "Facility Name" or "DBA" Doing Business As. Complete items 740-744, unless all items are the same as the Business Owner

740. TANK OWNER NAME

information (items 111-116) on the Business Owner/Operator Identification page

741. TANK OWNER ADDRESS

(OES Form 2730). If the same, write "SAME AS SITE" across this section

742. TANK OWNER CITY

743. TANK OWNER STATE

744. TANK OWNER ZIP CODE

- 745. TANK ID NUMBER 1-3 Enter up to three owner's tank ID numbers. This is a unique number used by the owner to identify the tank. If more than three tanks are being closed, complete additional copies of this page. (Enter additional tank numbers in 748 and 751.)
- 746. CONCENTRATION OF FLAMMABLE VAPOR 1-3 Enter three interior flammable vapor levels for each tank being closed, taken at the top, center, and bottom of the tank. (For more than one tank, enter additional tank readings in 749 and 752.)
- 747. CONCENTRATION OF OXYGEN 1-3 Enter three interior oxygen levels for each tank being closed, taken at the top, center, and bottom of the tank. (For more than one tank, enter additional tank readings in 750 and 753).
  - SIGNATURE The business owner or officer of the company who is authorized to make decisions for the facility and who has operational control, shall sign in the space provided.
- 754. CERTIFIER NAME Enter the full printed name of the person signing the page.
- 755. CERTIFIER TITLE Enter the title of the person signing the page.

excluded from regulation pursuant to 22 CCR Section 66261.6(a)(3)(B).

- 756. CERTIFIER ADDRESS Enter the address of the person signing the page.
- 757. CERTIFIER CITY Enter the city for the signer's address.
- 758. CERTIFIER PHONE Enter the phone number for the person signing the page.
- 759. DATE CERTIFIED Enter the date that the document was signed. Enter the time that the readings were taken.
- 760. CERTIFIER REPRESENTS LOCAL AGENCY Check "Yes" if the person certifying the tank is a representative of the CUPA, authorized agency, or LIA, check "No" if not.
- 761. NAME OF LOCAL AGENCY Enter the name of the local agency represented by the person certifying the tank.
- 762. AFFILIATION OF CERTIFYING PERSON Check the certification, license, or organization which the certifier holds or to which the certifying person belongs, if not a CUPA/ LIA.
- 763. TANK HELD FLAMMABLE OR COMBUSTIBLE MATERIALS Check "Yes" if the tank held flammable or combustible materials, check "No" if not.
- 764. MANAGEMENT INSTRUCTIONS Provide tank management instructions to the scrap dealer, disposal facility, etc., in this space.